

SCHEDULE A (FEC Form 3P) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JOHN MCCAIN 2008, INC.

<p>A. Full Name (Last, First, Middle Initial) MR. MICHAEL W. BISHOP</p> <p>Mailing Address 1679 WOODRIDGE PLACE</p> <p>City State Zip Code CAIRO GA 39828-3579</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer SOUTHERN STATES</p> <p>Occupation ACCOUNTS MANAGER</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17.781287</p>
<p>B. Full Name (Last, First, Middle Initial) MR. RICHARD H. BISHOP</p> <p>Mailing Address 1555 GUS'S GRIND</p> <p>City State Zip Code FAIRBANKS AK 99709-6038</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer</p> <p>Occupation RETIRED</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 5 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17.810677</p>
<p>C. Full Name (Last, First, Middle Initial) MR. ROBERT J. BISHOP</p> <p>Mailing Address 424 LOST TRAIL DRIVE</p> <p>City State Zip Code LAS VEGAS NV 89014-3407</p> <p>FEC ID number of contributing federal political committee.</p> <p>Name of Employer KIA INSURANCE/HEALTH INSU- RANCE AG</p> <p>Occupation INSURANCE REP</p> <p>Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 8 / 2 0 0 8</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p> <p>Transaction ID: SA17.785254</p>

SUBTOTAL of Receipts This Page (optional)

700.00

TOTAL This Period (last page this line number only)